### NCI Cancer Imaging Informatics Workshop September 26, 2002

Image-guided Therapy Center Washington University Saint Louis, Missouri

Walter R. Bosch, D.Sc.

Associate Director, Operations





# IMAGE-GUIDED THERAPY CENTER

Acknowledgements



J. A. Purdy, Ph.D.

Walter Bosch, D.Sc.

Jeff Michalski, M.D.

Bill Straube, M.S.

John Matthews, D.Sc.

Sean O'Leary, M.S.

Director

Assoc. Director, Operations

Assoc. Director, Clinical

Medical Physicist

**Computer Scientist** 

Programmer Analyst

# mage-Guided An Advanced herapy Technology Clinical Trials QA enter and Support Center

#### ITC HISTORY

- April 1992 3DQA Center established at WU-St. Louis to provide QA for RTOG 3DCRT clinical trials.
- May 1993 RTOG & 3DQA Center awarded NCI grant for Operation/ Statistical Center for prostate dose escalation study (3DOG).
- April 1999 NCI funded two Advanced Technology QA Centers
  - Advanced Technology QA Consortium
    - 3DQA Center → Image-guided Therapy Center (ITC)
    - RPC
    - QARC
    - RTOG
  - Resource Center for Emerging Technology (University of Florida)

# NCI ADVANCED TECHNOLOGY QA CONSORTIUM

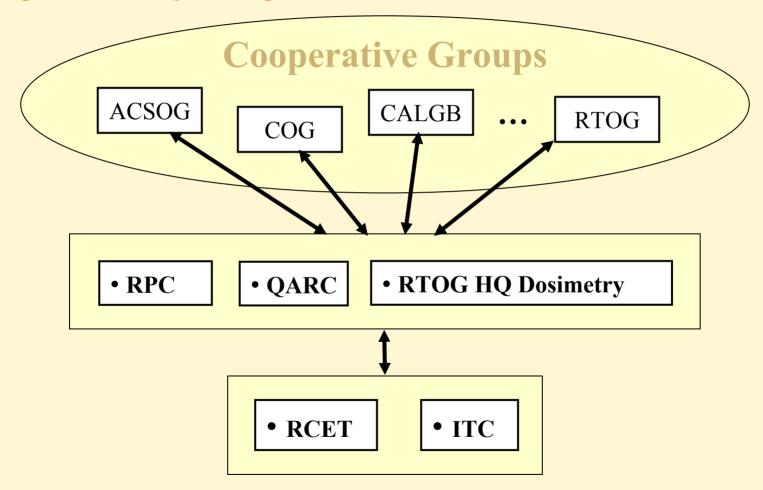


- In 2002, NCI has restructured the grant creating a single Advanced Technology Consortium (ATC) to support QA for advanced technology clinical trials (P.I. J. A. Purdy, Ph.D.)
- ATC consists of ITC, RCET, RPC, QARC, RTOG HQ Dosimetry
- New consolidated approach will eliminate duplication of effort and facilitate sharing of QA resources among cooperative groups.
- ATC will help ensure that appropriate and uniform QA procedures and criteria are developed for advanced technology trials.

#### Advanced Technology QA Consortium

mage-Guided An
Advanced
herapy Technology
Clinical Trials QA
enter and Support Center

Capitalizes on Infrastructure/Strengths of Existing National QA Programs

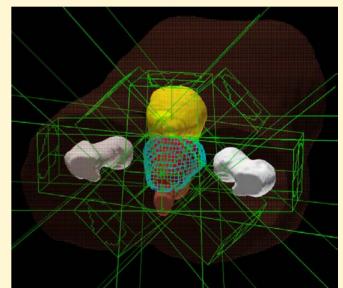


ITC and RCET provide a digital data exchange mechanism for existing QA Centers that serve various cooperative groups.

### ITC's Original Challenge



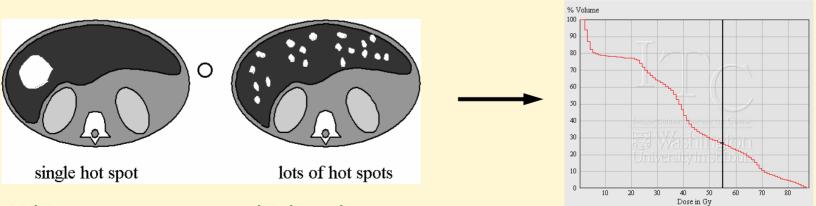
- Define basic technical and clinical QA criteria for participation in RTOG 3DCRT protocols
  - Protocol development/nomenclature
  - Facility questionaire
  - Dry run
- Develop treatment planning and verification (TPV) data exchange mechanism for participants
  - RTOG Data Exchange
  - DICOM RT Objects
- Develop QA program to review submitted TPV data
  - QA guidelines
  - Software tools



# What's Special About 3D Treatment Planning/Verification (TPV) Data?

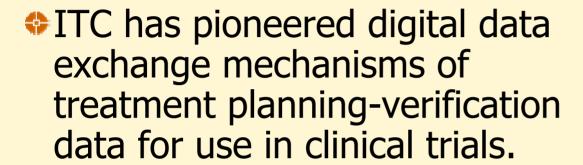


- Linkage of TPV data to clinical outcomes
  - Evaluating response statistics
  - Developing dose-response models.
- DVHs alone are not sufficient
  - Different dose distributions throughout an organ may lead to different expectations of toxicity for some organs.
  - Loss of Spatial Information in DVHs



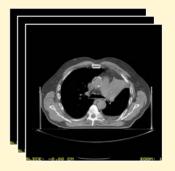
White zones represent higher dose areas.

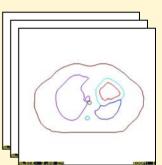
### DIGITAL DATA EXCHANGE TPV Data Submitted to ITC

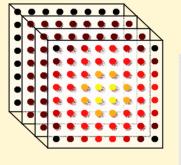


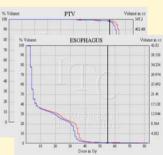
- Patient Volumetric CT Data Set
- Contours: GTV, CTV, PTV, OAR's
- Volumetric 3-D Dose Distribution Data (Including Fractionation)
- Dose-Volume Histograms
- Beam Modality/Geometry Specification
- Digital Simulator and Portal Images

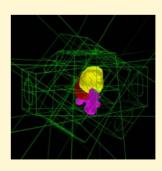












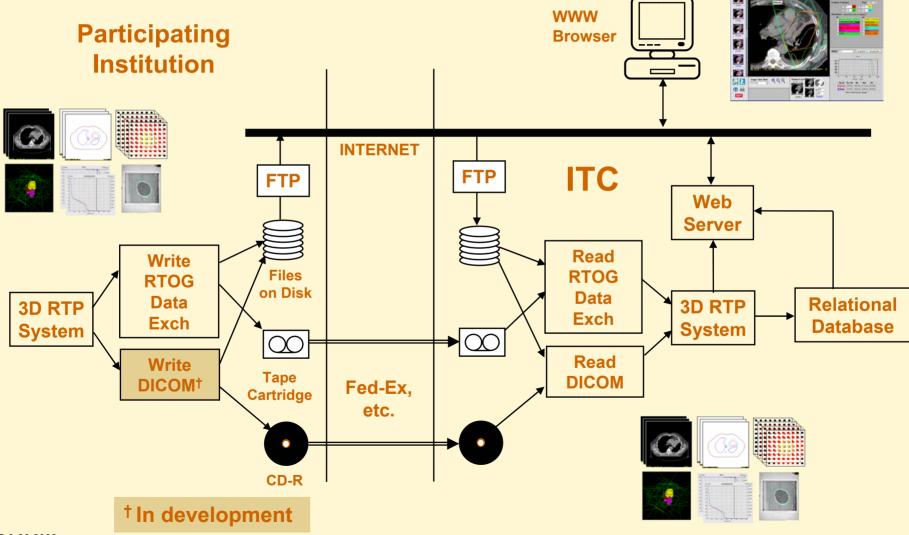


## IMAGE-GUIDED THERAPY CENTER C



**RCRT** 

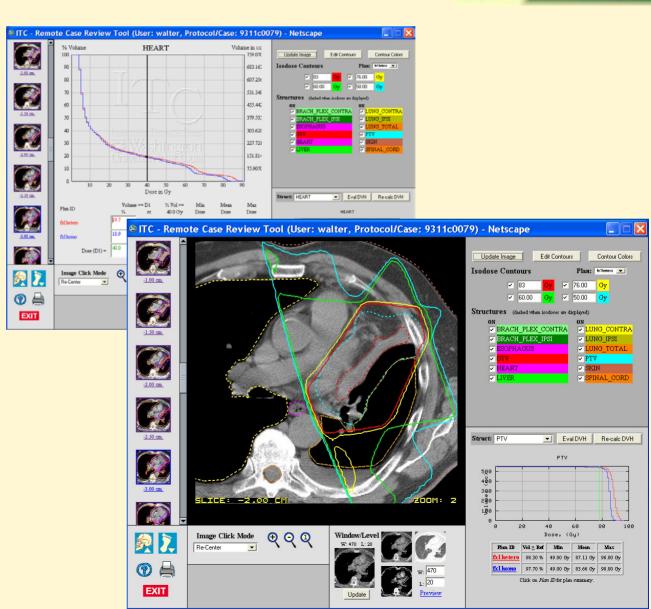




#### ITC Remote Case Review Tool

mage-Guided An
Advanced
herapy Technology
Clinical Trials QA
enter and Support Center

- Data Exchange
- CT Scan
- Organs at Risk Contours
- Target Volumes
  Contours
- Dose Prescription
- Dose uniformity



# mage-Guided An Advanced herapy Technology Clinical Trials QA enter and Support Center

### RTOG Advanced-Technology Protocols

RTOG Protocol	Site	Status	Approved Institutions	Accrued Cases*
9406	Prostate Ph I/II	Closed	53	1084
9311	Lung Ph I/II	Closed	26	180
9803	Brain (GBM) Ph I/II	Open	43	151
H-0022	Nasopharynx (IMRT) Ph I/II	Open	8	16
L-0117	Lung Ph I/II	Open	30	8
P-0126	Prostate Ph III	Open	57	14

<sup>\*</sup> as of 9/16/2002

### RTOG 94-06 3DCRT PROTOCOL

mage-Guided An
Advanced
herapy Technology
Clinical Trials QA
enter and Support Center

A Phase I/II Dose Escalation Study Using 3D Conformal Radiation Therapy for Adenocarcinoma of the Prostate

- 53 institutions credentialed to enroll patients on study.
- Dose Levels
  - 68.4 Gy (1.8 Gy/fraction)
  - 73.8 Gy (1.8 Gy/fraction)
  - 79.2 Gy to GTV; 73.8 Gy to PTV (1.8 Gy/fraction)
  - 74.0 Gy to PTV (2 Gy/fraction)
  - 78.0 Gy to PTV (2 Gy/fraction)
- Accrual History
  - May 2, 1994 Activation Date
  - Oct 31, 2000 1084 Patients (study closed)

# Grade 3+ Late Toxicities Expected Observed 14 12 10 8

6

Michalski, J.M., Purdy, J.A., Winter, K., et al. IJROBP 46(2):391-402, 2000.

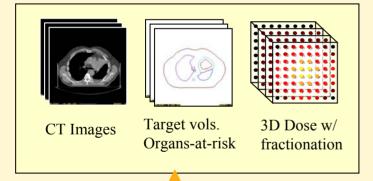
Group 2

**Group 1** 

### Linking Digital Treatment Planning Data to Outcomes



RTOG Protocol	Site	Status	Approved Institutions	Accrued Cases*
9406	Prostate Ph I/II	Closed	53	1084
9311	Lung Ph I/II	Closed	26	180
9803	Brain (GBM) Ph I/II	Open	43	151
H-0022	Nasopharynx (IMRT) Ph I/II	Open	8	16
L-0117	Lung Ph I/II	Open	30	8
P-0126	Prostate Ph III	Open	57	14



#### OUTCOMES

- Normal-tissue complications
- Tumor control

#### Early attempts

- Exchanges of Dose-Volume and Toxicity abstracts between RTOG HQ and ITC.
- M. Roach retrospective study using RCRT to contour penile bulb.
- New (planned) initiative
  - Dose-response modeling using RTOG 9406 data



### Data Exchange Technical Workshops for RTP Vendors

- Mar 10, 1995, St. Louis: implementation of RTOG Data Exchange standard for participation in multi-institutional clinical trials.
- Sep 10-11, 1999, St. Louis: implementation of RTOG Data Exchange standard (emphasis on prostate brachy).
- March 16-17, 2001, St. Louis: implementation of DICOM 3.0 standard for participation in multi-institutional clinical trials.
- March 16, 2002, St. Louis: implementation of DICOM 3.0 standard for participation in multi-institutional clinical trials.

#### IMAGE-GUIDED THERAPY CENTER



WASHINGTON UNIVERSITY IN ST. LOUIS

### **SUMMARY AND CONCLUSION**

- ITC has been in operation for nearly a decade and has provided RTOG the unique ability to conduct 3DCRT and IMRT multi-institutional clinical trials in which volumetric 3D treatment planning data can be collected, reviewed, analyzed, and linked to clinical outcomes.
- The **newly integrated ATC** is now in a position to extend these capabilities to a broad range of cooperative-group, advanced-technology clinical trials.